CHCANYS DEFINING NEW DIRECTIONS

Community Health Care Association of New York State

NYS-HCCN

Enrollment and Member Matching

June 20th, 2017 9:00 AM

Improving Patient Outcomes Through Data

Enrollment and Member Matching

June 20, 2017

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Agenda

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- Introductions
- Overview
- Attribution: The First Step
- Patient vs Member Data
- Demo
  - Matched Members
  - Soft Match Validation
  - Eligibility
  - Registry
  - PVP

Introductions

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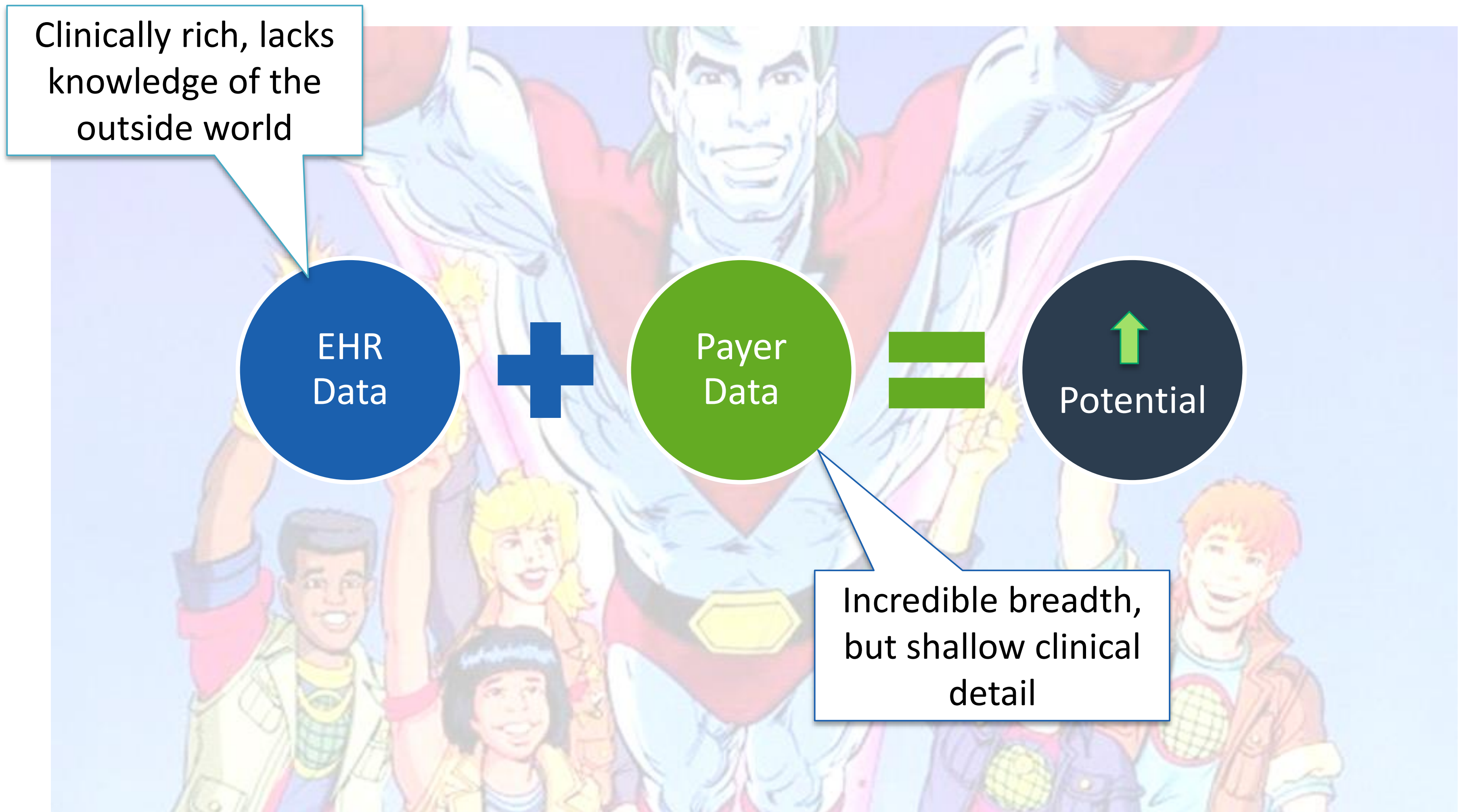
LuAnn Kimker RN MSN

Director of Clinical Innovation

Phil Parker

Director Client Analytics

Value of Payer Integration



Patients vs Members

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PATIENTS (EHR)

- Demographics
- Usual and Rendering Provider
- Recent and Future Encounters
- Encounter Location
- Chronic Disease History
- Risk Factors
- Clinical Data/Alerts
- Lab Results

MEMBERS (CLAIMS)

- Enrollment
  - Start/End date
  - Demographics
  - Member ID/#
- PCP / Site Assignment
- Claims/Cost
  - Medical
  - Pharmacy
  - Behavioral Health
  - Dental
  - Vision
- Inpatient / ER Utilization
- Risk Scores

Claims Latency / Lag

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- Always make sure you choose the correct period
- Claims data is at least 6 weeks behind
- Example using United Data
  - Monthly feeds are received from United on the 20th, for data ending prior month end.
  - E.g., On 5/20 Azara received data through 4/30
  - Data is loaded to DRVS within 5 days

What Questions Do We Want to Answer?

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ATTRIBUTION

- What patients are assigned to us that we haven’t seen?
- How do we contact our unseen assignees?
- Which of our patients do we need to get in for services?

OUTCOMES

- Are we meeting our quality incentive targets?
- How do I manage the care gaps?
- What resources do we need to manage our at risk populations?

PATIENT ACTIVITY

- Are my patients going elsewhere for care?
- Which of my patients are “frequent fliers at ERs?
- Where are they going for higher levels of care? (IP, ER)

RISK & UTILIZATION

- Who are my most expensive patients (TME)? Highest risk?
- What services are they using?
- What diseases are contributing to our highest costs?
- Are we managing patients’ transitions in care?

The value of clinical and claims data

ATTRIBUTION: THE FIRST STEP

Information Overload

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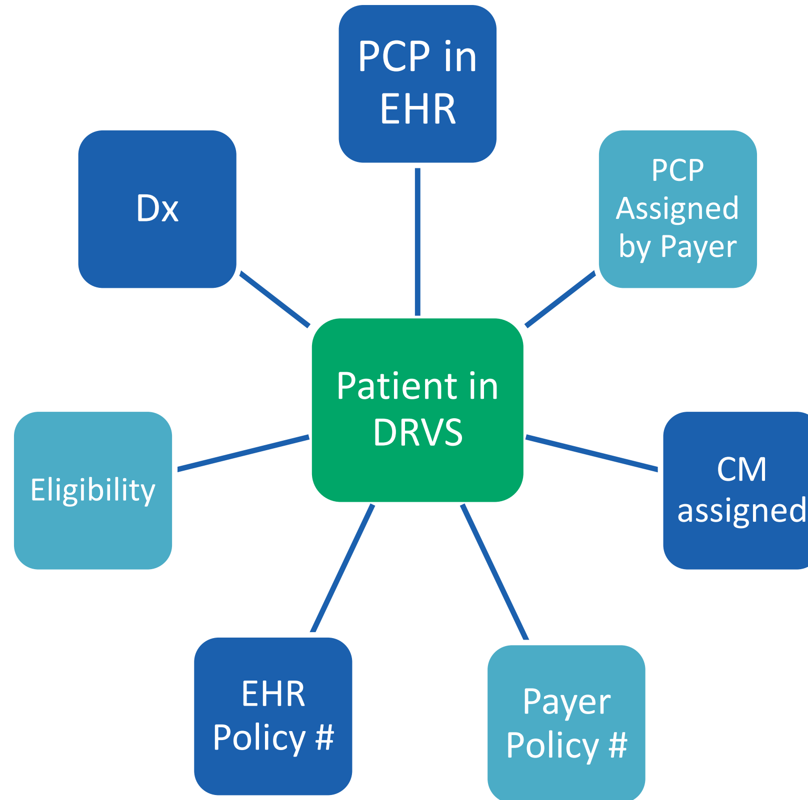

Why is Attribution Important?

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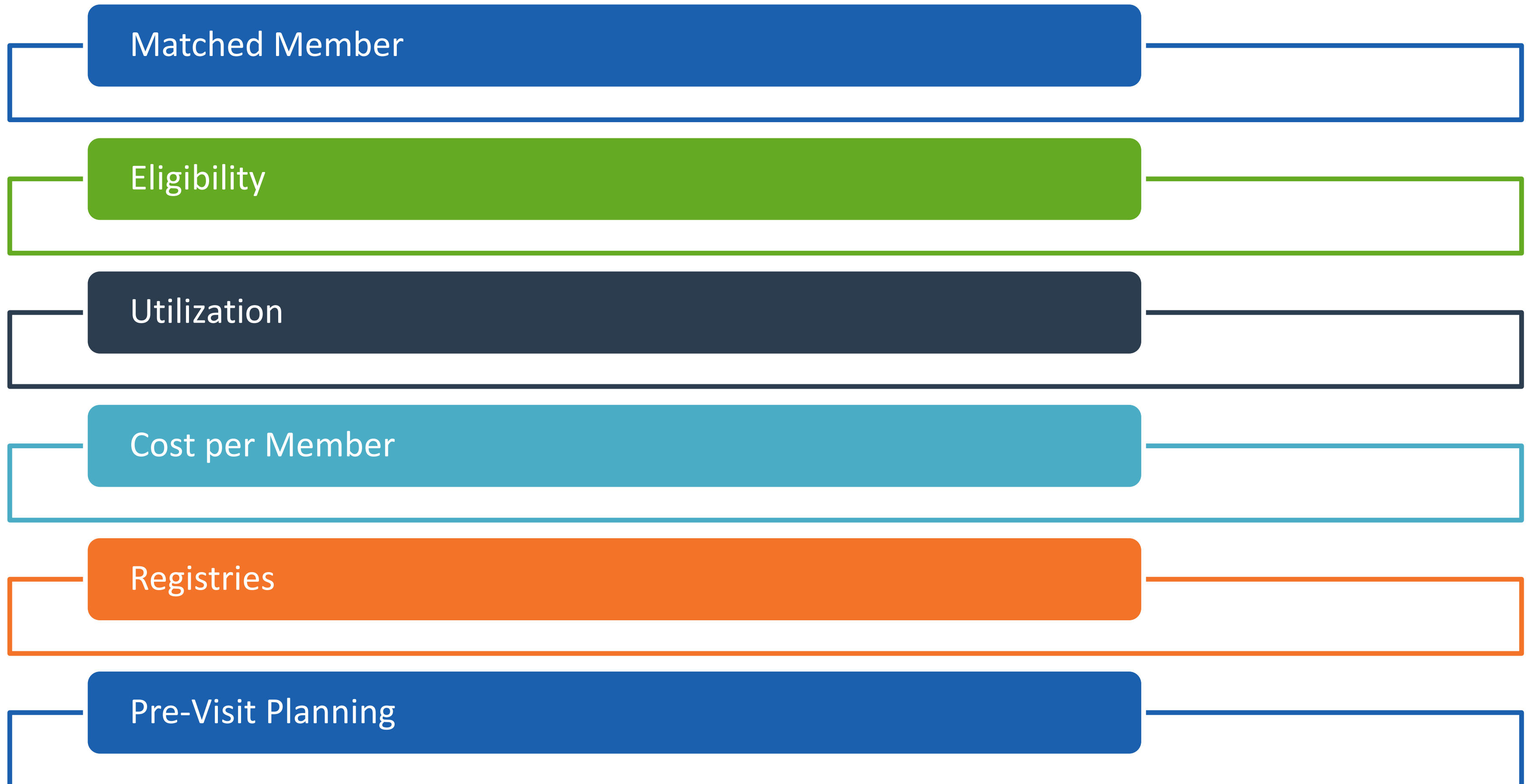
- You can’t manage what you don’t know
- Know which patient are assigned to you
- Understand their risks
- Assess performance on quality measures
- Target your interventions

Fam Pract Manag. 2016 Nov-Dec;23(6):25-30

How Can CPCI Help Us Manage Our Population?



Putting It Into Practice

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1. Outreach Coordinator
   - How do I identify [Plan A] members that have never been seen at our CHC?
   - What do I do when the member is listed as 'non matched' but I think they have been a patient at our CHC?
2. Engagement Manager
   - How do I see if the [Plan A] members that are patients at our CHC have had an appointment in the last year? Which ones should I focus on first?
   - What members are new to our plan this month?
   - What members became inactive and is there anything we should do?
3. Care/Program Manager
   - I want to identify the members that have more than one chronic disease and haven't been seen recently.
   - I want to know if any of our [Plan A] patients have appointments this week.

Putting It Into Practice |2

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4. Quality Improvement Coordinator
   - How is the CHC performing on [Plan As] quality incentive measures.
   - Are there members we need to get in so that we can meet our quality targets?
5. Administrator
   - How many new members are assigned to my CHC each month?
   - What is the net increase of members per month? Average Members per Month

Access to Payer Integration Functionality

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- Interested in getting access to Payer Integration Functionality?
  - You must be live on CPIC
  - Open an Azara Support Ticket

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QUESTIONS

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CPCI Payer Integration

DEMONSTRATION

CPCI Reporting Tools - Navigation

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Visit Planning
Dashboards
Reports
Measures
Registries
Admin

HealthFirst (IFH)
Hypertension
Internal Medicine
Matched Members ✓
NYU-LFHC Diabetes
NYU-LFHC DSRIP 3.a.i
NYU-LFHC DSRIP II
NYU-LFHC DSRIP Speed & Scale
NYU-LFHC Peds
Nigels Test
Payer Integration
Pediatrics

Registries
Admin

MillionHearts
P4C
Payer Integration
Soft Matching ✓
Members ✓

Favorites
Visit Planning
Dashboards
Reports
Measures
Registries

Payer Integration
Average Cost PMPM
Average Member Months ✓
Cost per Member
ER Utilization Rate
ER Visits Per Utilizer
Growth Rate ✓
Inpatient Utilization Rate
Inpatient Visits Per Utilizer
Newly Eligible Members ✓
Newly Ineligible Members ✓
Matched Members ✓

Matched Member Dashboard

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Matched Member

- Understand what members are followed at your health center and their characteristics
- Match of DOB and member number OR Medicare OR Medicaid if available
- Use to assess interventions aimed at:
  - Outreach to patients not previously seen at the health center
  - Engagement of health center patients who have not been seen recently or do not have a scheduled appointment
  - Patients in a targeted age range

Matched Member Dashboard

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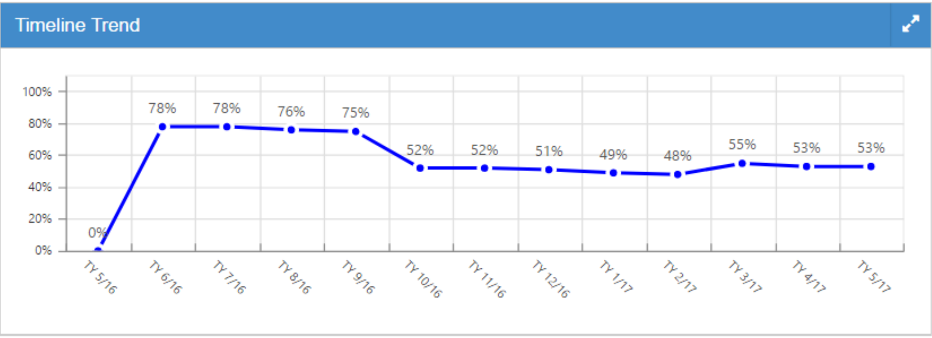
Dashboards - Matched Members

Period Type	Period	Centers	Plans	Last Encounter	Age
Trailing Year	TY May 2017	Centers	Plans	Last Encounter	Age

Update

Timeline Trend



Matched Members Group By Age

Age	Match Rate	Matched	Unmatched
<= 1	46%	4,027	4,803
2-4	63%	7,393	4,396
5-12	67%	19,826	9,551
13-14	65%	4,365	2,315
15-19	58%	9,907	7,174
20-34	43%	26,366	35,298

Matched Members Group By Cost

Cost Group	Match Rate	Matched	Unmatched
$0-5k	73%	1,679	612
$5k-10k	100%	5	0
$10k-25k	0%	0	1
$25k-50k	100%	3	0

Matched Members Group By Last Encounter

Last Encounter	Members	% Total
No Encounter	111,436	50%
0-180	78,373	35%
181-365	17,781	8%
366-720	11,652	5%
>720	3,289	1%
Totals	222,531	

- Filter by Center, Plan, Last Encounter, Age, Cost Group

Matched Member Dashboard

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Selected Patients for Matched Members ×

Filtered by : Denominator

Plan	Name	Member Number	Matched	Eligbility Start	Eligbility End	EHR MRN	Age	DOB	Age Group	Sex	Language	EHR Usual Provider	Plan Usual Provider	Plan Usual Provider NPI
United Healthcare			Y	10/1/2016	1/31/2017		60		45-64	M		Unassigned Provider		
United Healthcare			Y	10/1/2016	12/31/2030		68		65 +	F		Teitelbaum, Jeffrey		
HealthFirst			Y	2/17/2016	12/31/2030		44		35-44	F		Robertson, Virginia		
United Healthcare			Y	10/1/2016	12/31/2030		70		65 +	M		Antonios, Vera		
HealthFirst			Y	10/1/2015	12/31/2030		58		45-64	M		Brownlow, Nathaniel		
HealthPlus			Y	3/1/2017	12/31/9999		48		45-64	M		MCADAM, JOHN MARK		
United Healthcare			Y	10/1/2016	12/31/2030		58		45-64	F		Napolitano, Blaise		
United Healthcare			Y	2/1/2017	12/31/2030		58		45-64	M		Napolitano, Blaise		

1 of 99 pages (1676 items)

$50k-100k	57%	1,029	771
>$100k	50%	560	551

*Available only with claims data

No Encounter	78,977	68%
0-180	24,119	21%
181-365	6,354	6%
366-720	4,363	4%
>720	1,676	1%
Totals	115,489	

Drill down capability to get the detailed population of interest.

Detail for Member Match Reports (no claims)

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Demographics and Eligibility Dates

Plan	Member Number	Matched	Eligbility Start	Eligbility End	EHR MRN	Age	DOB	Age Group	Sex	Language
United Healthcare	102377804	N	4/1/2017	12/31/2030		6	4/12/2011	5-12	F	
United Healthcare	102417912	N	4/1/2017	12/31/2030		25	11/27/199	20-34	M	
United Healthcare	102652395	N	4/1/2017	12/31/2030		24	8/24/1992	20-34	M	

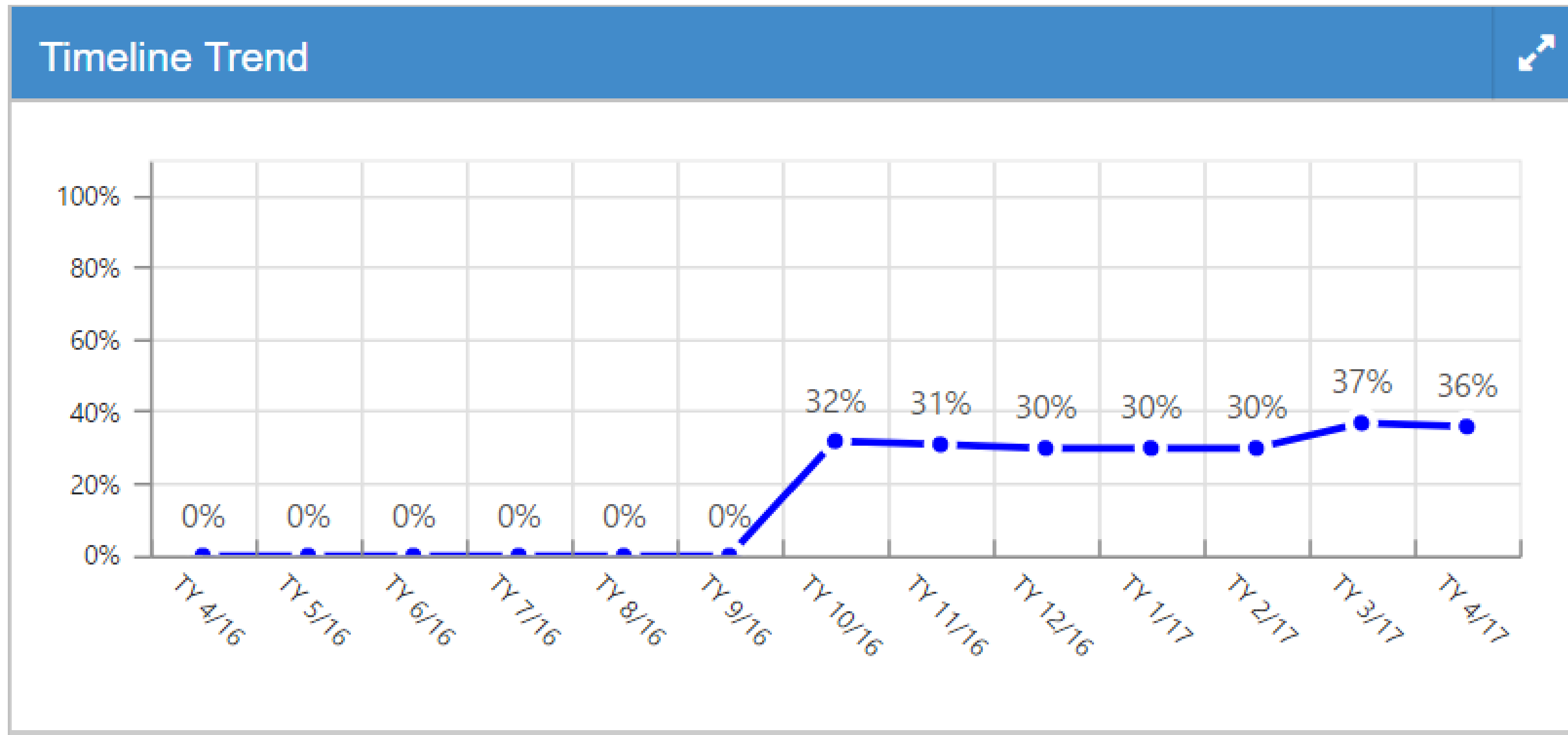
Recent & Upcoming Encounters

Plan		EHR Usual Provider	Plan Usual Provider	Plan Usual Provider NPI	Most Recent Enc	Most Recent Enc Provider	Most Recent Enc Location	Last Encounter Group	Next Appt	Next Appt Provider
United Healthcare										
United Healthcare										
United Healthcare										

Chronic Conditions and Risk from EHR

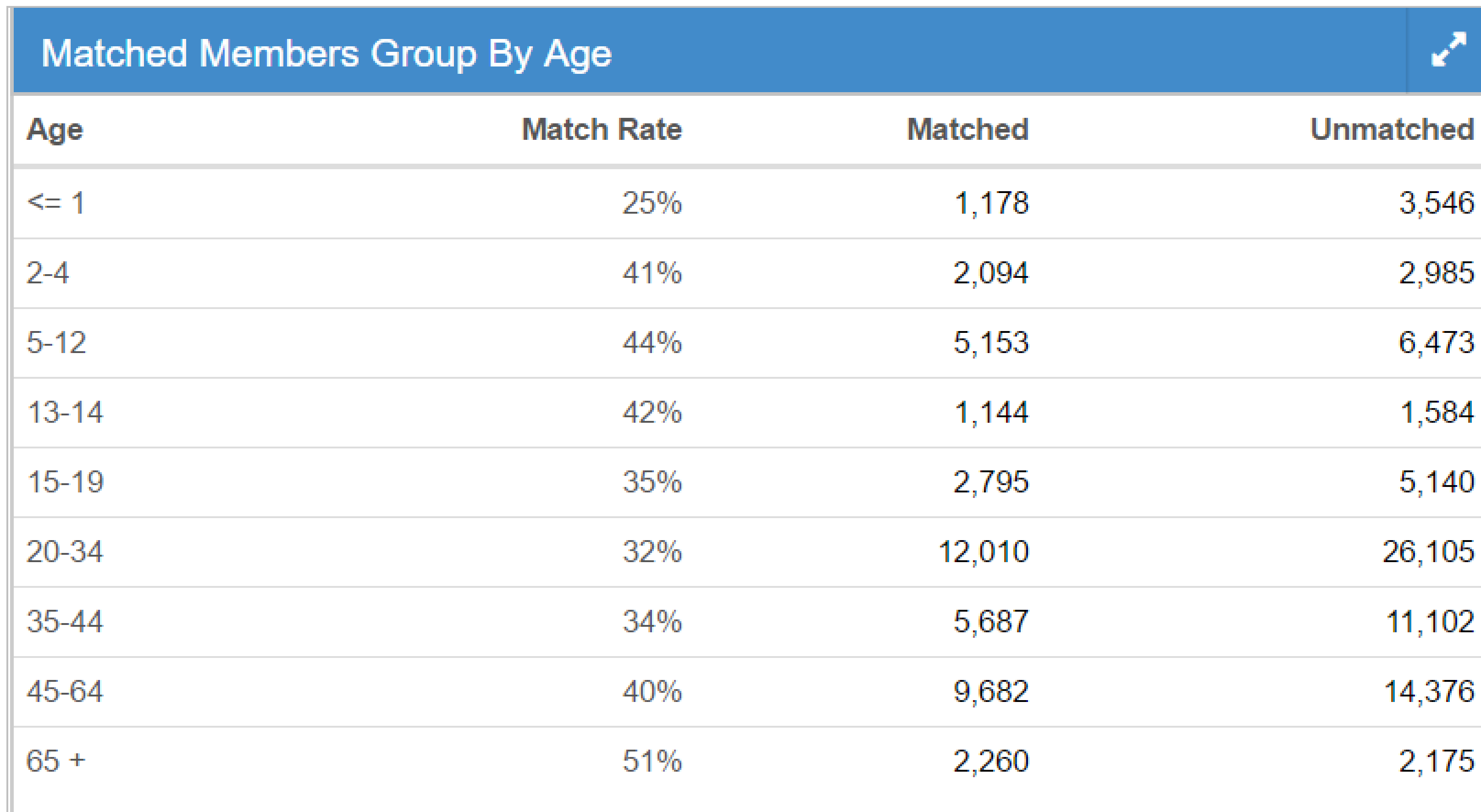
Plan	Next Appt Location	DM	HTN	CHF	IVD	CAD	ASM	HIV	ESRD	Cancer	SMP	ASD	Numerator
Affinity		Y	Y						Y	Y			N
Affinity			Y	Y		Y						Y	N
Affinity		Y	Y	Y							Y		N

Match Rate Trend



- Tracks the % match rate of eligible members to patients in the EHR .
- Match rates will improve as outreach and or engagement occurs.
- Compare match rates across different health plans.

Matched Members Group By Age

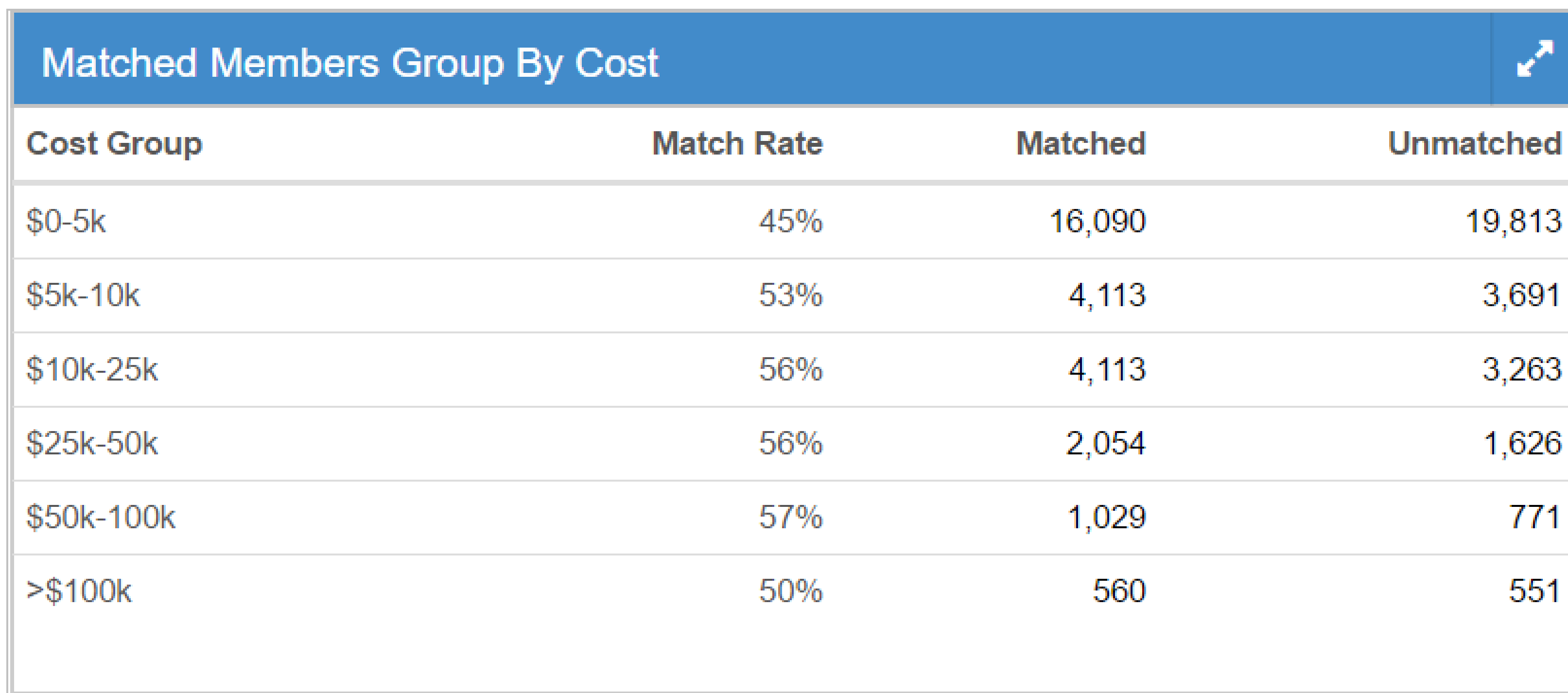


Matched Members Group By Age

Age	Match Rate	Matched	Unmatched
<= 1	25%	1,178	3,546
2-4	41%	2,094	2,985
5-12	44%	5,153	6,473
13-14	42%	1,144	1,584
15-19	35%	2,795	5,140
20-34	32%	12,010	26,105
35-44	34%	5,687	11,102
45-64	40%	9,682	14,376
65 +	51%	2,260	2,175

- Stratifies members into age categories.
- Helps to target/prioritize outreach & enrollment efforts to demographics most receptive or based on programmatic needs.

Members Grouped By Cost



Matched Members Group By Cost

Cost Group	Match Rate	Matched	Unmatched
$0-5k	45%	16,090	19,813
$5k-10k	53%	4,113	3,691
$10k-25k	56%	4,113	3,263
$25k-50k	56%	2,054	1,626
$50k-100k	57%	1,029	771
>$100k	50%	560	551

- Stratifies members into age categories
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Matched Members Grouped By Last Encounter

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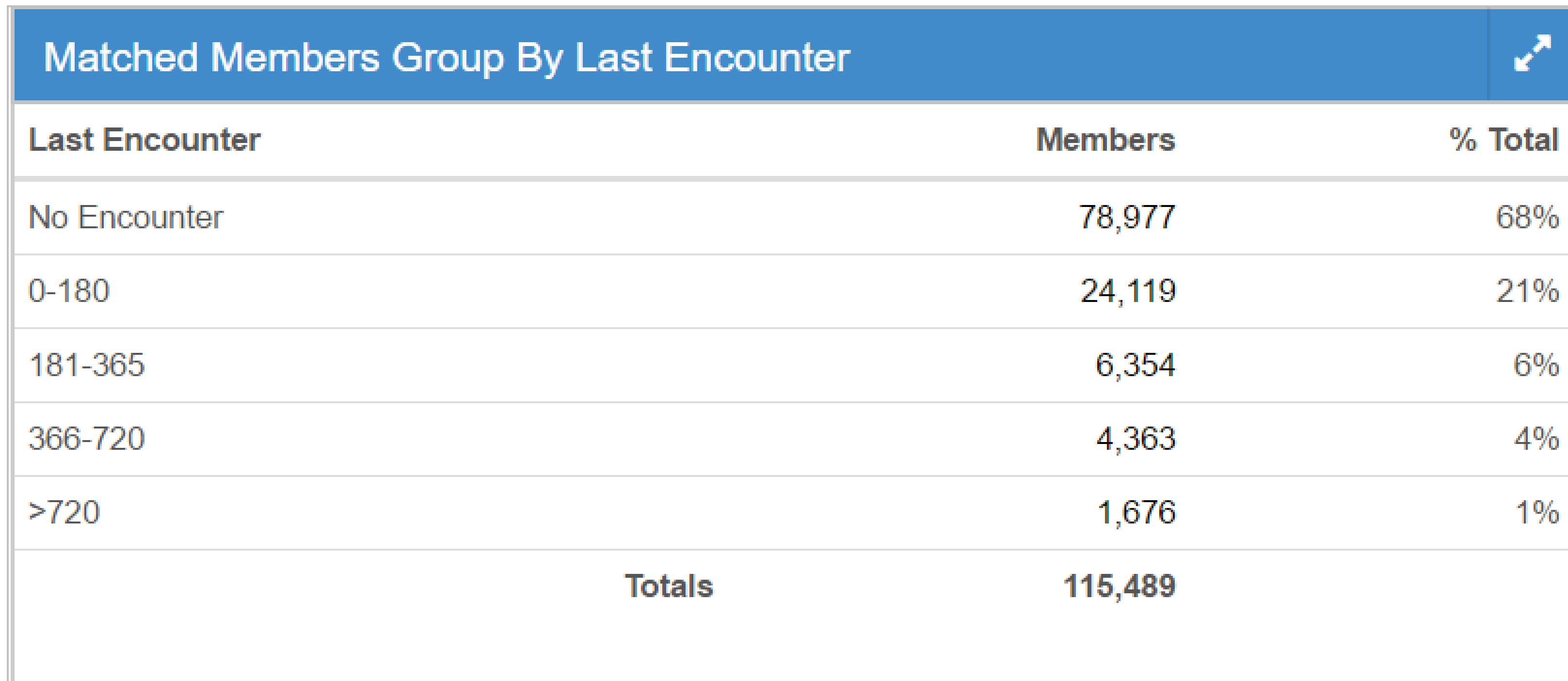

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>720	1,676	1%
Totals	115,489	

- Identifies patients in/out of compliance with MCO visit frequency guidelines
- Focus recall efforts for optimal effectiveness

Soft Matching Registry – Validate the Un-Matched

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- Standard match =

  DOB + member/policy # or Medicare/Medicaid #
- Soft Match Algorithm utilizes other demographic criteria to match members. e.g., first, last name, or initial, address, phone
- Confidence ranking of the match
  - 30+ “CUTS” to make a match
  - A rank of #1 has the highest level of confidence
  - In Azara’s testing, each cut had an error rate of <10% based on the standard vs soft match compare

Soft Matching Report

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Payer Integration - Soft Matching

Period Type: Month
Period: June 2017
Centers: Centers
United Health Plan
Update

Member Number	CutNo	Soft Matched Method	Member Name	Patient Name	Member DOB	Patient DOB	Member Address	Patient Addr
794A	21	First Name, Last Name, DOB, Address1	SPEES, LOREN	SPEES, LOREN	6/29/2014	6/29/2014	900 Third St.	900 Third St.
794A	38	Medicaid Number	SPEES, LOREN	KALER, EVAN	6/29/2014	7/28/2005	900 Third St.	684 Elm St.
794A	39	Medicare Number	SPEES, LOREN	OHLSON, JAE	6/29/2014	4/6/1998	900 Third St.	787 East St.
786A	4	Medicaid Number, First Initial	WINKLEMAN, EDMUND	KALER, EVAN	6/12/1964	7/28/2005	182 East St.	684 Elm St.
786A	21	First Name, Last Name, DOB, Address1	WINKLEMAN, EDMUND	WINKLEMAN, EDMUND	6/12/1964	6/12/1964	182 East St.	182 East St.
786A	39	Medicare Number	WINKLEMAN, EDMUND	OHLSON, JAE	6/12/1964	4/6/1998	182 East St.	787 East St.

Match Rank (CutNo)

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- Ranking (cut number) and criteria used to rank the match
- Action – identifies the what to look at to see where there might be an error

CutNo (Match Rank)	Description	Action
Cut 1-2	Policy/Member # + First Name or First Initial	Check DOB
Cuts 3-6	Medicaid or Medicare # + First Name or First Initial	Check DOB
Cuts 7-8	Medicaid or Medicare # + Policy/Member #	Check DOB
Cuts 9-12	First Name + Last Name + DOB + Phone1 or 2 + Address1 or 2	Check Policy/Member #
Cuts 13-16	First Initial + Last Name + DOB + Phone1 or 2 + Address1 or 2	Check Policy/Member #
Cuts 17-20	First Name or First Initial + Last Name + DOB + Phone1 or 2	Check Policy/Member #
Cuts 21-24	First Name or First Initial + Last Name + DOB + Address 1 or 2	Check Policy/Member #
Cuts 25-26	First Name + Last Name + DOB	Check Policy/Member #
Cut 27	Last Name + First Name Initial +DOB	Check Policy/Member #
Cuts 28-31	Last Name or First Name + DOB + Phone1 or Phone2	Check Policy/Member #
Cuts 32 and 34	Last Name or First Name + DOB + Address	Check Policy/Member #
Cuts 33 and 35	Last Name or First Name + DOB + Address + Address2	Check Policy/Member #
Cut 36	First Name to Last Name + last Name to first Name + DOB	Check Policy/Member #
Cut 37	Policy/Member #	Check DOB
Cut 38	Medicaid #	Check DOB
Cut 39	Medicare #	Check DOB

Eligibility Measures

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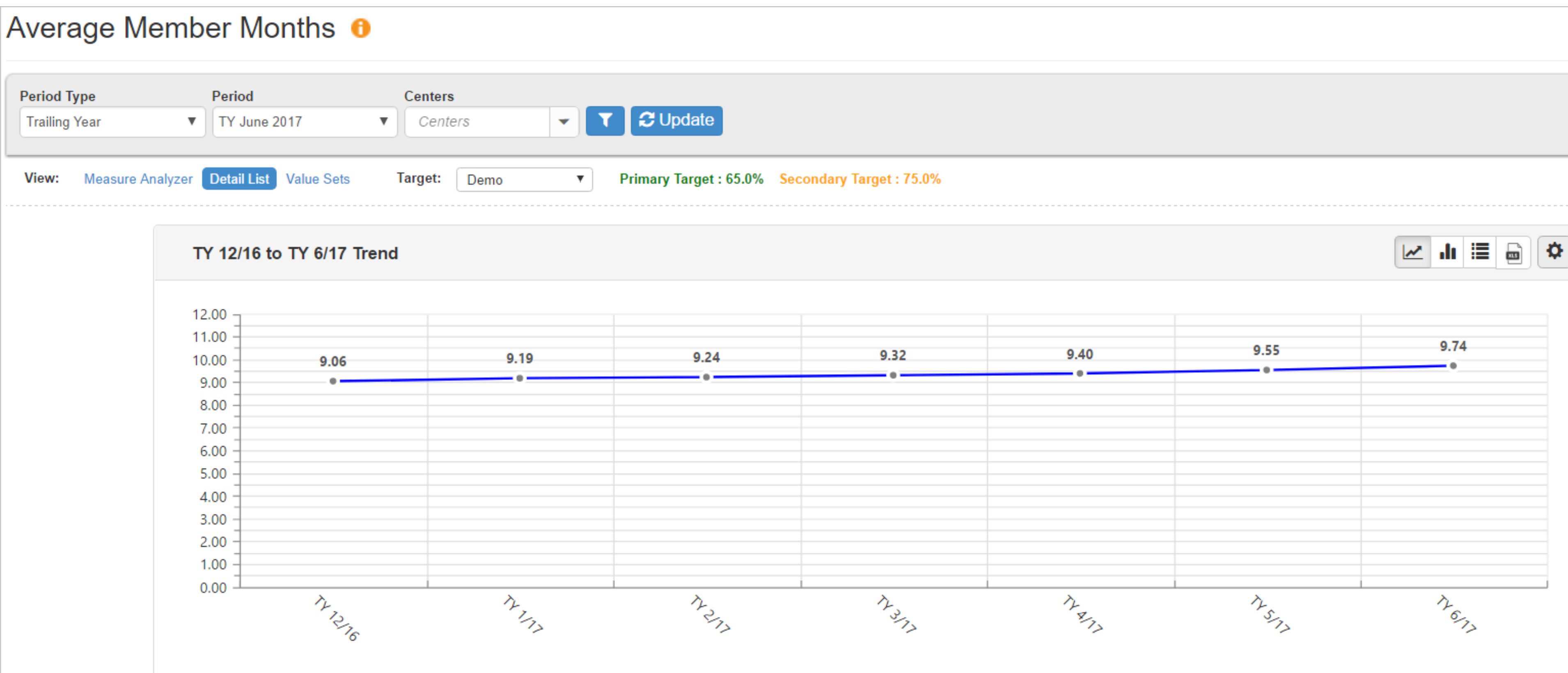
Eligibility Measures

- Understand member turnover
- Based on members eligible / active at the end of the period
- Used to assesses interventions aimed at:
  - Outreach to new members in the plan
  - At risk patients that become ineligible
  - Growth rate – net gain of new members

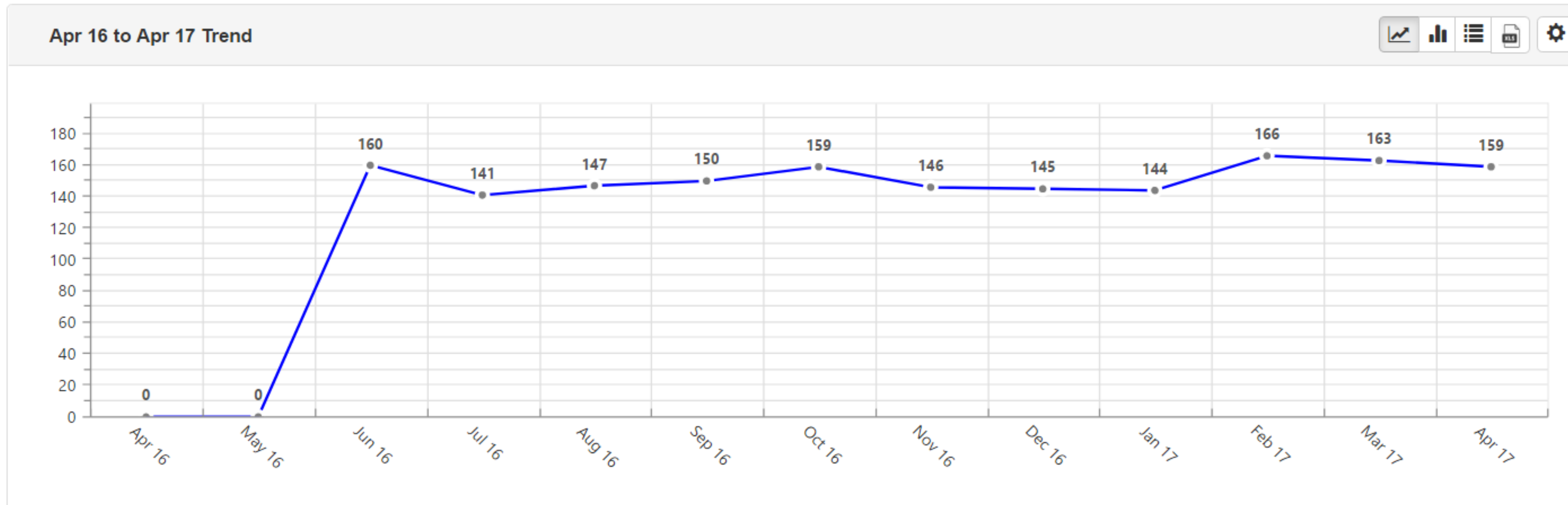
Average Member Months

- Average months incurred by active assigned members in the period.



Newly Eligible Members

- The count of members eligible at the end of the period that became eligible during the period.
- Defaults to Month Period Type



Newly Ineligible Members

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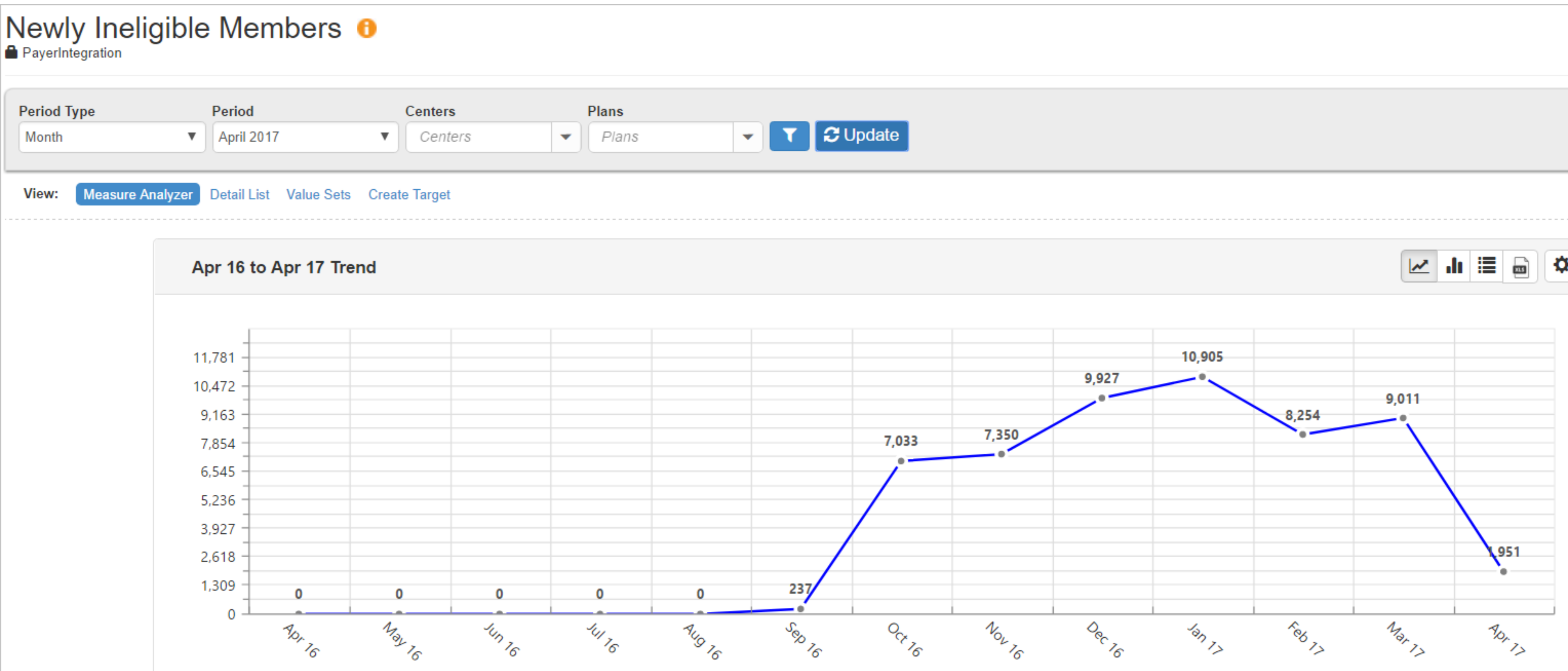
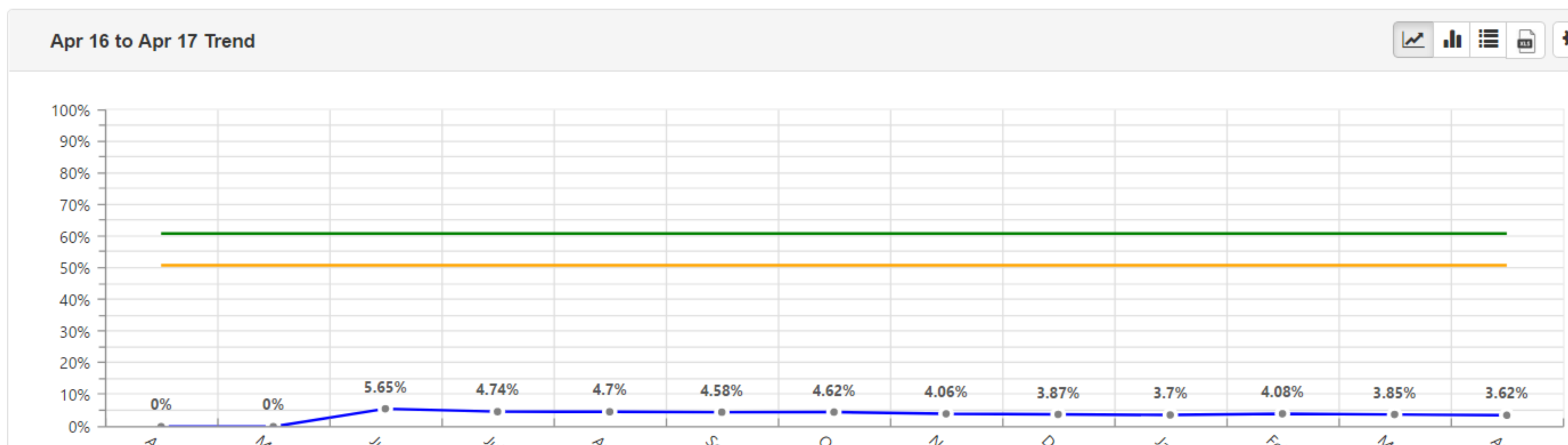
- Members who were eligible at the beginning of the period and lost eligibility during the period.



Growth Rate

- The change in eligible membership during the period.



Clinical Measures – Filter by Plan

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- Understand clinical measure performance for a specific payer group
- Filter patient based measures and reports to specific payers
- Note: Measure definitions do not change, the denominator is only filtered to patients matched to members of the plan

UDS - UDS 2017 CQM's

Period Type: Trailing Year
Period: TY June 2017
Centers: Centers
Providers: Providers
Service Lines: Service Lines
Plans: Plans
Update

Search

Community Health Plan
United Health Plan
Group Health

Filters
- [x] Centers
- [x] Providers
- [ ] Locations
- [ ] Patient Diagnoses
- [ ] Enrollees
- [ ] Race
- [ ] Migrant Worker Status
- [ ] Homelessness Status
- [ ] Ethnicity
- [ ] Language
- [ ] Patient Risk
- [ ] Gender Identity
- [ ] Sexual Orientation
- [ ] Sex at Birth
- [x] Service Lines
- [ ] Financial Class
- [ ] Payer Groups
- [x] Plans

Measure		...or	De...
BMI Screening and Follow-Up 18+ Years (NQF 0421)		06	
CAD Lipid Therapy		51	
Cervical Cancer Screening (NQF 0032)		37	
Child Weight Screening / BMI / Nutritional /Physical Activity Counseling (NQF 0024 modified)	53.0 %	0	
Childhood Immunization Status (NQF 0038)	72.0 %	32	
Colorectal Cancer Screening (NQF 0034)	64.0 %	125	
Diabetes A1c < 8 (NQF 0059 modified)	51.0 %	524	
Diabetes A1c > 9 or Untested (NQF 0059)	42.0 %	757	
HIV Linkage to Care	26.0 %	93	
Hypertension Controlling High Blood Pressure (NQF 0018)	75.0 %	551	
IVD Aspirin Use (NQF 0068)	67.0 %	1,802	
Screening for Clinical Depression and Follow-Up Plan (NQF 0418)	41.0 %	769	
Tobacco Use: Screening and Cessation (NQF 0028)	36.0 %	910	

Clinical Measures – Filter by Plan

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- Group by Grouping ‘Plan’ and Report Format ‘Crosstab’ to compare performance across different plans

UDS - UDS 2016 CQM's

Group by Plan

UDS - UDS 2016 CQM's

Period Type	Period	Centers	Providers	Service Lines	Grouping	Report Format
Trailing Year	TY April 2017	Centers	Providers	Service Lines	Plans	CrossTab

Update

Plan	CAD Lipid Therapy	HIV Linkage to Care	Hypertension Controlling High Blood Pressure (NQF 0018)	Child Weight Screening / BMI / Nutritional /Physical Activity Counseling (NQF 0024 modified)	Tobacco Use: Screening and Cessation (NQF 0028)	Cervical Cancer Screening - Pap Only (NQF 0032 – CMS124v4)	Colorectal Cancer Screening (NQF 0034)
Community Health Plan	97.7 %	86.8 %	81.9 %	0.0 %	98.3 %	68.1 %	43.8 %
Group Health	97.8 %	93.1 %	90.8 %	0.0 %	99.6 %	66.1 %	47.9 %
United Health Plan	97.3 %	89.7 %	83.4				

Group by Plan + Cross Tab Report Format

Pre-Visit Planning Tool

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- Filters
  - Plan filter - identify scheduled patients coming in who are in a specific plan
  - Patient Risk filter - identify patients who are coming in that are high risk
  - Combine for both plan and risk
- Use MRN look up to look up one or multiple patients that are newly eligible and high risk